

Arkansas Stand-Alone Prescription Drug Plan Organizations (PDP Region 19)

* The beneficiary drug premium covers prescription drugs only and does not cover medical or hospital benefits. Beneficiaries are responsible for their Part B premium and any premiums for Medigap coverage to meet their individual needs.

Includes contracts/plans approved as of September 25, 2005. The data does not reflect information for some demonstrations, National PACE organizations, Employer sponsored plans, or plans that were not approved by the "As of" date of the chart.

Organization Name	Plan Name	Beneficiary Total Drug Plan Premium *	Drug Deductible			Includes Tiered Copay- ments for Drugs	Type of Additional Coverage Offered in Coverage Gap		Mail Order Offered	Number of Top 100 Drugs on Formulary
			Zero	Reduced	Standard (\$250)		Generics Only	Generics and Brands		
Aetna Life Insurance Company	Aetna Medicare Prescription Basic Plan	\$35.47			•	•			•	82
	Aetna Medicare Prescription Standard Plan	\$46.56	•			•	•		•	82
	Aetna Medicare Prescription Premier Plan	\$62.52	•			•	•		•	95
CIGNA HealthCare	Plan 00319	\$33.85			•	•			•	99
	Plan 00519	\$39.12	•			•			•	99
	Plan 00619	\$46.39	•			•	•		•	99
Community Care Rx	CCR _X BASIC	\$30.23			•	•				89
	CCR _X CHOICE	\$38.30			•	•				89
	CCR _X GOLD	\$42.24		•		•				89
Coventry AdvantraRx	AdvantraRx Value	\$20.58	•			•			•	73
	AdvantraRx Premier	\$33.30	•			•			•	97
	AdvantraRx Premier Plus	\$44.00	•			•			•	97
Humana Inc.	Humana PDP Standard S5884-077	\$10.31			•				•	97
	Humana PDP Enhanced S5884-017	\$17.21	•			•			•	97
	Humana PDP Complete S5884-047	\$58.97	•			•		•	•	97
Medi-Pak Rx	Arkansas Blue Cross Blue Shield Std Def	\$30.71			•				•	88
	Arkansas Blue Cross Blue Shield ActEquStd	\$37.95			•	•			•	88
	Arkansas Blue Cross Blue Shield Enh Alt #1	\$51.34	•			•			•	88
PacifiCare Life and Health Insurance Company	PacifiCare Saver Plan	\$34.68	•			•			•	77
	PacifiCare Select Plan	\$49.02	•			•			•	86
	PacifiCare Complete Plan	\$54.51	•			•	•		•	77
Prescription Pathway	Pennsylvania Life Standard Defined Reg 19	\$30.71			•				•	88
	Pennsylvania Life Act. Equ. Standard Reg19	\$40.07			•	•			•	88
	Marquette National Act Equ Std Reg 19	\$40.15			•	•			•	88
	Pennsylvania Life Enhanced #1 Reg 19	\$51.35	•			•			•	88
	Marquette National Enhanced #1 Reg 19	\$51.41	•			•			•	88
	Marquette National Enhanced #2 Reg 19	\$67.98	•			•			•	96
SilverScript	SilverScript	\$27.57			•	•			•	89
	SilverScript Plus	\$55.26		•		•			•	94
Sterling Prescription Drug Plan	Sterling Prescription Drug Plan	\$53.59		•		•			•	94
Unicare	Medicare RX Rewards	\$26.85			•	•			•	88
	Medicare RX Rewards Plus	\$34.69	•			•			•	88
	Medicare RX Rewards Premier	\$46.28	•			•	•		•	96
United American Insurance Company	United American Medicare Drug Plan	\$34.83	•			•			•	93
United HealthCare Insurance Company	AARP Medicare Rx by UnitedHealthcare	\$27.21	•			•			•	96
	United Medicare Rx - B	\$31.34	•			•			•	96
WellCare	WellCare Signature	\$28.38	•			•			•	86
	WellCare Complete	\$46.96	•			•			•	83
	WellCare Premier	\$50.74	•			•			•	82
YOURx PLAN	Medco Prescription Savings Plan	\$30.78			•	•			•	93